U.S. DISTRICT COURT N.D. OF ALABAMA

United States District Court

for the NORTHERN DISTRICT OF ALABAMA

ூ கர		3	* 1 - \max	1510
200 and	100	7	5	. ake.
4	Ē	Sinha	14/9/00	Sant

	ZOZO NOV 13 ₱ 1: 30
Plaintiff, (Write your full name. No more than one plaintiff may be named in a pro se complaint) HOUBSHAD V. CIYCL KING.	U.S. DISTRICT COURT N.D. OF ALABAMA Case No. 20-U-V-V-V-S-C (to be filled in by the Clerk's Office) JURY TRIAL Yes No
Defendant(s), (Write the full name of each defendant who is being sued. If the names of all defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names) COMPLAINT FOR EMPLOY	YMENT DISCRIMINATION
I. The Parties to This Complaint	TABLET DISCRIMINATION
A. The Plaintiff	1 RANTHO

Name	
Street Address	605 Btn AVP.SW
City and County	Alabaster, AL 35007
State and Zip Code	Svelly curty
Telephone Number	251-3(02-10)4
E-mail Address (if known)	MSULTET WANGELL COM
Check here to receive	e electronic notice through the e-mail listed above. By
checking this box, the	e undersigned consents to electronic service and waives
the right to personal	service by first class mail pursuant to Federal Rule of
Civil Procedure 5(b)	(2), except with regard to service of a summons and
complaint. The Notic	e of Electronic Filing will allow one free look at the

Date Participant Signature

document, and any attached PDF may be printed and saved.

II. Basis for Jurisdiction

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant 1	No. 1	C. V. Land
Nan	ne	CIVILLE INC.
Job	or Title (if known)	WA
Stre	et Address	HUT TUMNOUSE VOI
City	and County	Neuna, Strethis
Stat	e and Zip Code	Alabama, 35007
Tele	ephone Number	205-004-8747
E-m	ail Address (if known)	N/A.
Defendant l	No. 2	·
Nan	ne	KIMMENTY ROCKOT
Job	or Title (if known)	Store manager
Stre	et Address	THE TUNN NOUSEROL.
City	and County	Helena Shelby
Stat	e and Zip Code	Alghama 35007
Tele	phone Number	205-3010-2370
E-m	ail Address (if known)	AllA
Defendant l	No. 3	
Nan	ne	David Bean
Job	or Title (if known)	District manager
Stre	et Address	1107 town MOUSE rd
City	and County	paradous Henling Shelby
State	e and Zip Code	HUMMA 35007
Tele	phone Number	205-577-1413
E-m	ail Address (if known)	NIF

Pro Se	7 (Rev. 10/1	6) Complaint for Employment Discrimination
		Defendant No. 4
		Name
		Job or Title (if known)
		Street Address
		City and County
		State and Zip Code
		Telephone Number
		E-mail Address (if known)
	C.	Place of Employment
		The address at which I sought employment or was employed by the defendant(s)
		is:
		Name
		Street Address
		City and County
		State and Zip Code
•		Telephone Number
II.	Basis	for Jurisdiction
	This	action is brought for discrimination in employment pursuant to (check all that
	apply	?):
	#	Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to
		2000e-17 (race color, gender, religion, national origin).
		(Note: In order to bring suit in federal district court under Title VII, you must
		first obtain a Notice of Right to Sue letter from the Equal Employment
		Opportunity Commission.)
		Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to
		634.
		(Note: In order to bring suit in federal district court under the Age
		Discrimination in Employment Act, you must first file a charge with the Equal
		Employment Opportunity Commission.)

Pro Se 7	(Rev. 10/1	6) Complain	t for Employment Discrimination		
		Ameri	cans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to		
		12117.			
		(Note:	In order to bring suit in federal district court under the Americans with		
		Disabi	lities Act, you must first obtain a Notice of Right to Sue letter from the		
		Equal	Employment Opportunity Commission.)		
		Other	federal law (specify the federal law):		
		Releva	ant state law (specify, if known):		
	Relevant city or county law (specify, if known):				
III.	. Statement of Claim Write a short and plain statement of the claim. Do not make legal arguments. State				
	briefl	briefly as possible the facts showing that plaintiff is entitled to the damages or other reli			
	sough	sought. State how each defendant was involved and what each defendant did that caused			
	the p	laintiff h	arm or violated the plaintiff's rights, including the dates and places of that		
	invol	vement c	nt or conduct. If more than one claim is asserted, number each claim and write		
	a sho	rt and pla	plain statement of each claim in a separate paragraph. Attach additional pages		
	if nee	eded.			
	A.	The di	scriminatory conduct of which I complain in this action includes (check all		
		that ap	oply):		
			Failure to hire me		
		$\mathbf{\Phi}$	Termination of my employment		
			Failure to promote me		
			Failure to accommodate my disability		
			Unequal terms and conditions of my employment		
		₽	Retaliation		
			Other acts (specify):		
			(Note: Only those grounds raised in the charge filed with the Equal		
			Employment Opportunity Commission can be considered by the federal		
			district court under the federal employment discrimination statutes.)		

division.)

V.

IV. Exhaustion of Federal Admi	nistrative Remedies
--------------------------------	---------------------

A. It is my best recollection that I filed a charge with the Equal Employme
Opportunity Commission or my Equal Employment Opportunity counselergarding the defendant's alleged discriminatory conduct on (date):
B. The Equal Employment Opportunity Commission (check one):
☐ has not issued a Notice of Right to Sue letter
issued a Notice of Right to Sue letter, which I received on (date):
(Note: Attach a copy of the Notice of Right to Sue letter from the Equ
Employment Opportunity Commission to this complaint.)
C. Only litigants alleging age discrimination must answer this question:
Since filing my charge of age discrimination with the Equal Employme
Opportunity Commission regarding the defendant's alleged discriminator
conduct (check one):
60 days or more have elapsed
☐ less than 60 days have elapsed
Relief
State briefly and precisely what damages or other relief the plaintiff asks the court
order. Do not make legal arguments. Include any basis for claiming that the wrong
alleged are continuing at the present time. Include the amounts of any actual damage
claimed for the acts alleged and the basis for these amounts. Include any punitive of
exemplary damages claimed, the amounts, and the reasons you claim you are entitled
SUL JULY 300 (
· · · · · · · · · · · · · · · · · · ·

VI. Certification and Closing

Under Rule 11 of the Federal Rules of Civil Procedure, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where caserelated papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	Date of Signing: 11 13 2020
	Signature of Plaintiff:
	Printed Name of Plaintiff: Half 501
В.	For Attorneys
	Date of Signing:
	Signature of Attorney:
	Printed Name of Attorney:
	Bar Number:
	Name of Law Firm:
	Street Address:
	State and Zip Code:
	Telephone Number:
	E-mail Address: